
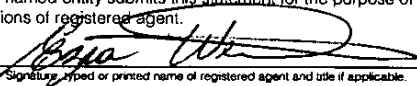
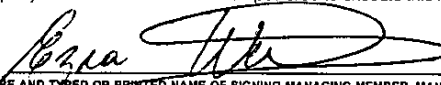


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-22-2006 90288 021 ****50.00

DOCUMENT # L05000068746 1. Entity Name MENDON INDUSTRIES CONSTRUCTION SITE CLEAN-UP, LLC																																					
Principal Place of Business 23279 HAINLIN AVENUE PORT CHARLOTTE, FL 33980			Mailing Address 23279 HAINLIN AVENUE PORT CHARLOTTE, FL 33980																																		
2. Principal Place of Business		3. Mailing Address																																			
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																			
City & State		City & State																																			
Zip		Country		Zip																																	
6. Name and Address of Current Registered Agent GLENN N. SIEGEL, P.A. 17825 MURDOCK CIRCLE, STE. A PORT CHARLOTTE, FL 33948				7. Name and Address of New Registered Agent Name Ezra Walters Street Address (P.O. Box Number is Not Acceptable) 23279 Hainlin Ave Port Charlotte City Port Charlotte FL Zip Code 33980																																	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE 2-9-06																																					
Filing Fee is \$50.00 Due by May 1, 2006			Make check payable to Florida Department of State																																		
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: center;">Delete</td> </tr> <tr> <td></td> <td>President Ezra Walters</td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td>23279 Hainlin Ave</td> <td></td> </tr> <tr> <td></td> <td>Port Charlotte, FL 33980</td> <td></td> </tr> </table>			TITLE	NAME	Delete		President Ezra Walters	<input type="checkbox"/>		23279 Hainlin Ave			Port Charlotte, FL 33980		10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">NAME</td> <td style="width: 20%; text-align: center;">Change</td> <td style="width: 20%; text-align: center;">Addition</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td>VP Rosemarie Walters</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td></td> <td>23279 Hainlin Ave</td> <td></td> <td></td> </tr> <tr> <td></td> <td>Port Charlotte, FL 33980</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	Change	Addition			<input type="checkbox"/>	<input type="checkbox"/>		VP Rosemarie Walters	<input type="checkbox"/>	<input type="checkbox"/>		23279 Hainlin Ave				Port Charlotte, FL 33980		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.																																					
SIGNATURE:  Ezra Walters 2-9-06 766-1676 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #																																					

20018730



01062006 Chg-LLC CR2E083 (11/05)

4. FEI Number **20-3146616** Applied For Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

2-9-06

941